				Food E	Divis Stat	sion of I Olishn	Envi nen	ronme It Ins	ntal l	ction		Page _	1	of	2
INSPECTION	RSI	TYPE	GRADE	INSPECTION	ON DA	TE	EST	FABLISH	IMENT	NAME	30.78.79				
Regular	1	1	7	5 / 29			_			ood BB	Q	70.72	_		
Follow-up	_		,	TIME IN	TIM	IE OUT	PERMIT HOLDER								
Complaint	1	-	RATING	4:25PM	COLAIT	·NO	Clemente, Marilyn								
nvestigation SANITARY PERMIT NO. LOCATION (Address) 190000620 118 Chalan Agatelang Dededo, GU						edo GU									
Other:	APLI	CUME	NT TYPE					TO THE PARTY OF TH						ATE/	COR
			Service	AREA 8	TELEPHONE 488-5225		No. of Risk Factor/Intervention Violations RISK CAT No. of Repeat Risk Factor/Intervention Violations 3								:GOR
IVIOU	MC.			the state of the s		_			-	COLUMN TAXABLE DE	EALTH INTERVE	NITIONIC	_		
		ce OU	ircie or mark "X" o	designated compliance	(IN, OU	T, N/O, N/A) for e	ach numb	pered its	m. Mark	"X" in appropriate box for COS furing inspection R = Repeat v	and/or R.		emerit į	points
Complian	ce Si	atus				COS R	PTS	Con	nplian	ce Status				S R	P
				ervision present, demonstrates				16	IIM OI		tentially Hazardous Food Proper cooking time and temp		-	_	1 6
1 00	UT.		knowledge, and p	•	•		6		_		Proper reheating procedures f		+	+	16
	. ::		Employ	yee Health			120	18	IN OU	IT N/A 🎾	Proper cooling time and temper	erature			6
2 K OL				areness; policy present			6				Proper hot holding temperature			\perp	6
3 🗶 🛚	υr			orting, restriction & exc	lusion		6		₩ OU		Proper cold holding temperatu		-	+	6
		_		ienic Practices sting, drinking, betelnut,	or		_	41	IN OU	II MARE INVO	Proper date marking and dispo		-		16
4 K OL			tobacco use	n eyes, nose, and mou		\vdash	6				Consumer Advisor		_	_	_
		P		amination by Hand			T 6	22	IN OU	т Ж	Consumer Advisory provide undercooked foo				6
_				ntact with ready-to-eat for	oods or		6		40.00		Highly Susceptible Popu	lations		•	
7 💢 οι	JI 1%	A NO		te method properly follo			T.	23	IN OU	т 🗽	Pasteurized Foods used; prohi		at	T	Te
8 IN 3	<u>(</u>		accessible	ashing facilities supplied	d &		6		200000		offered Chemical	130	_		1
0 144 0	_			red Source			1 6	24	IN OU	T 96	Food additives: approved and	properly used			6
9 0 OL		A NO		nm approved source proper temperature			6	 					+	+	+
11 DK OL		n nyeg		dition, safe, and unadu	Iterated		6	25	X on	Т	Toxic substances property ider used	nunea, storea,			6
12 IN OL	$\overline{}$	£ 1110		available: shelistock ta			6			Con	formance with Approved	Procedure:	5		_
12 IN OC	<u>" / </u>	V NO	parasite destruction				0	26	IN OU	T N/A T	Compliance with variance, spe	cialized		T	T 6
13 K ou	T N			m Contamination	_		T e			/\	process, and HACCP plan			100	
14 X OU			Food separated a Food contact surf	ina protectea faces: cleaned & sanitiz	red		6	1			e improper practices or procedu				
15 X ou				of returned, previously			6	1			outing factors of foodborne illner e control measures to prevent for				
13 17 00	_		served, reconditio	ned, and unsafe food	887	10.00	_				o consortionosos to proteste i	DOGDOTTIC IIITIC	50 01		
				DESCRIPTION OF THE PERSON NAMED IN COLUMN 1		DD RE									
Mark	"X" in	how If a									nicals, and physical objects into nspection R =Repeat violatio		emeri	t noints	
Compliano				CALIF COMMUNICATION OF COMMUNICATION CO		COS R	PIS	Com		e Status			CO	SR	TPT
	_			d and Water							Proper Use of Utens	ils	_		
27	Past	eurized	iggs used where r	equired	-		1	40	_		sils: properly stored		-	+	11
28	Wate	er and lo	e from approved s	ource	- 1		2	41		utensiis, eq handled	uipment and linens: property sta	orea, anea,			1
29	Varia	nce obt	ained for specialize	ed processing methods	300		1	42	\rightarrow		single-service articles: properly	stored, used			1
	- 0			erature Control				43		Gloves used					1
30			_	adequate equipment for	r		1				Utensils, Equipment and	THE RESERVE OF THE PERSON NAMED IN	_		_
31		food or	operty cooked for t	hot holding	-		1	44			onfood-contact surfaces cleanal onstructed, and used	ble, property			1
32			wing methods use		\neg		1	45			ng facilities: Installed, maintaine	d, used; test	+		1
100	_				_	_	-	_	_	strips			-	+-	-
33 X	Iner	nomete	r provided and acc	entification			1	46	1 1	NONTOOO-CO	ntact surfaces clean Physical Facilities			-	11
34	Food	propert	/ labeled; original				1	47		Hot & cold v	vater available, adequate press				2
				ood Contamination	1			48	-		stalled; proper backflow device:			E 16943	1 2
35	_		nts, and animals n				2	49		Sewage and	t wastewater properly disposed				2
36			n prevented during	g food peparation, stora	age &		1	50		Toilet faciliti	ies: properly constructed, suppli	ed, & cleaned			2
37	displ Pers	onal clea	ınliness				1	51	1	Garbane/ref	fuse properly disposed; facilities	maintained	1		2
38				roperly used and stored			1	52					1		1
Washing fruits and vegetables				1				THE RESERVE OF THE PERSON NAMED IN			1				
				nd the above viola							Documents and Place			_	
lar	n aw	are of		measures that sh				54	1		rmit, Health Certificates valid ar	nd posted			N/
Person in Cl	harge	(Print a	ind Sign)	aricyh cu	KI	LEH	75	_	MC	Da	ite: 5-29-19				
DEH Inspect	tor (P	rint and					1	1.		F.	llow-up (Mark one): YES	NO F	ollow	-up Da /8/201	ate
4000			Kiuki	10HDO gar/	J.GAF		1	1			llow-up (Mark one): YES	110	6/	8/201	9
Ke	w: 11.	en.10		/	- svint e ;	DPHSS/DEH		ow: Food	cstabli!	outed/II					

		D	ivision of E	nvironment				2 . 2		
CCTABLIC	HMENT NAME	FUUU ES			pection R	eport	Page _	$\frac{2}{2}$ of $\frac{2}{2}$		
				LOCATION (Ad						
	Seafood BBQ SPECTION DATE	To a surra management		118 Chalan Agatelang Dededo, GU						
	/ 29 / 2019	SANITARY PERMIT N 19000062	20	PERMIT HOLDER Clemente, Marilyn						
		TEM	PERATUR	RE OBSEF	EVATIONS					
	Item/Locatio	n	Temperature	(° F)	Item/l	ocation	Tem	perature (° F)		
	Barbecue/Cold hold		28.5							
	ken Barbecue/Cold h	olding	31.5							
Ribs/Cool			201.1							
	ecue/Hot holding		142.5							
	Chicken Barbecue/Cooking 174									
Red Rice/	Hot holding		170.0							
										
										
ITEM NO.		OBSERVAT	TIONS AN	D CORRE	CTIVE ACT	IONS		CORRECT		
Violation	l ns cited in this rep	ort must be correct	ted within th	he time fram	es indicated,		in Sections 8-	BY DATE 405.11 and		
	1			e Guam Foo	d Code.					
	A regular inspec	ction was conducted	<u>d</u>							
						-				
	The following v	iolations were obse	erved:							
	The following v	TOTALIONS WETE OUS	CI VCu.							
8	No hot water pro	ovided for handwa	sh sink insi	de mobile			·	6/8/19		
		ter provided for handwash sink inside mobile.								
	Hot water shall be provided to promote proper handwash hygiene.									
33								6/28/19		
	A food thermon	neter shall be provid	ded to mon	itor tempera	tures of pote	entially				
	hazardous food.					,				
	mazardous 100d.							-		
						<u>.</u>				
	Photos taken.						<u> </u>			
	PIC briefed on the	he above.			· · · · · · · · · · · · · · · · · · ·	<u> </u>		1 1 1		
					 -			2		
										
										
								+		
				*						
he immediate	suspension of the Sanita the Director within the ner	ns listed above identify viola ary Permit or downgrade. If riod of time established in th	seeking to appe	al the result of a	the date specified ny notice or inspec	by the Department tion findings, a writ	Fallure to comply item request for hear	nay result in ing must be		
erson in Cha	rge (Print and Sign)	EMELTE	MC	الم			Date; 2	1-10		
EH Inspector	r (Print and Sign) R.OF	SIONOO Chr /	J. GARO	UA Yh	F		Date:			
Rev:	11.28.16	/ White:	: DPHSS/DEH	Yellow: Food Es	tablishment					